



Minutes

House Select Committee on Methamphetamine Abuse

**Wednesday, December 12, 2012
Room 1027, Legislative Building
1:00 pm**

The House Select Committee on Methamphetamine Abuse met on Wednesday, December 12, 2012 at 1:00 p.m. in Room 1027 of the Legislative Building.

Representative D. Craig Horn, Co-Chair presided.

The following members were present:

Representative Craig Horn, Co-Chair
Representative Sarah Stevens
Representative Mark Hollo
Representative Marian McLawhorn

Representative Annie Mobley
Representative Joe Tolson
Representative John Faircloth, Co-Chair
Representative Trudi Walend

Representative Horn called the meeting to order. He welcomed everyone. Representative Horn welcomed and recognized our House Sergeant at Arms, Jesse Hayes, and Reggie Sills. Minutes were approved as presented.

Representative Horn introduced Special Agent Van Shaw, Deputy Assistant Director of the Special Operations Division, with the State Bureau of Investigation. He asked Director Shaw to update the committee on the methamphetamine labs in North Carolina and the status of the NPLeX implementation in the state.

(Attachment 1) Director Shaw's Presentation: **Methamphetamine Lab Update**

Rep. Horn opened up the floor for questions.

Rep. Stevens: Are you finding that the numbers are increasing because of the one pot method?

Van Shaw: Yes- Makes the cook easier, more mobile. One pot is the biggest problem everywhere, not just in N.C.

Rep. Stevens: Would another issue be that the awareness is greater?

Van Shaw: Awareness is number 1. NPLeX serves as a great investigative tool. Many labs discovered in N.C. are a result of another law enforcement action. This is more common.

Rep. Stevens: These numbers are greater in rural counties than urban areas.

Van Shaw: Yes, it still falls on the lines of being more rural. Addicts want to get away so they can cook meth. We are seeing more troublesome signs. The one-pots are being found in more automobile issues.

Rep. Stevens: Do you know anything about the bust in Yadkin County?

Van Shaw: (Called on Mr. Duke to answer.)

Todd Duke: Yes, the information about that bust was accurate.

Rep. Horn: Introduced Todd Duke.

Todd Duke: The meth cook was being looked for in an investigation and the police was serving a warrant on him. He was within half a mile of a school.

Rep. Stevens: How much pseudoephedrine did he have?

Todd Duke: It doesn't take a whole lot to do that. He probably had 2 people helping him. It's a continuing cycle, not a continuous cook.

Rep. McLawhorn: Several years ago, there was a concern that the pharmacy records might be used for other purposes—does law enforcement, can they use it as an investigative tool other than looking for meth? And does the law enforcement agent have to explain why he is looking in the log?

Van Shaw: No mam. Any law enforcement agent can go in and look at these logs. The system works best if you are looking for a specific individual.

Rep. McLawhorn: They can't ask the pharmacist to pull up records on a "John Doe"?

Van Shaw: No. It is specific to pseudoephedrine only.

Rep. Walend: In my district, meth addicts have gone over to S.C. to get pseudoephedrine.

Van Shaw: NPLeX has 25 states that are signed on. S.C. is one of those states. So, it does work well for bordering states. Georgia is a problem because they are not signed on with NPLeX. There are pharmacies that are on the system voluntarily even if NPLeX does not have that state.

Rep. Walend: Is Georgia doing anything?

Van Shaw: Yes, they are. We are constantly talking to GA. They did enact a law to address further the pseudoephedrine issue. We do share information and work with each other daily.

Rep. Faircloth: We tend to talk about labs. Labs used to mean a fixed structure. Now we talk about one pots. I think it would be helpful if when we heard the numbers if we could differentiate between one pots and meth labs.

Van Shaw: 80% are one pots that we responded to this year. They are very similar to the larger structured, fixed traditional meth lab. We refer to them as labs because we still have to take the same precautions. We do break them up if they are one pot or traditional labs specifically.

Rep. Faircloth: With NPLeX, what does "successful" mean?

Van Shaw: What I mean is NPLeX is doing exactly what it was designed to do. It is reporting the sales and it has a block sale feature which works. It is a law enforcement tool and

we can look at the purchasing history and see trends. We are identifying more labs because of NPLEEx, but the product is still getting out there and meth is still being made. The NPLEEx system is working however.

Rep. Hollo: Do you see an advantage of making pseudoephedrine prescription only?

Van Shaw: Yes. Look at Oregon, but it won't eradicate the problem all together. Oregon and Mississippi have had a dramatic decrease in labs.

Rep. Hollo: Have those states seen an increase in "Dr. shopping"?

Van Shaw: I have no information on that.

Rep. Hollo: (could not hear question)

Van Shaw: I'm not sure to be honest with you.

Rep. Hollo: What's going on in Wilkes County?

Van Shaw: There has been success in identifying meth labs.

Rep. Hollo: Due to that success, are there less meth labs?

Van Shaw: Yes, when they are being arrested they will move away from investigative areas.

Rep. Stevens: Can pharmacists prescribe?

Hal Pell: There may be something known as a certified pharmacists, but I will need to look for more information.

Rep. Horn: Rep. Murry says there is a precedent for pharmacist to write prescriptions, but it is a very narrow precedent. Some states are doing it.

Rep. Stevens: As far as this committee is concerned, will people indicted for meth, be place in the VAN system.

Van Shaw: Yes, they will be placed in the system where their purchases are blocked.

Rep. Stevens: Can they be put in the system so they can't buy anything?

Van Shaw: It would have to be legislative.

Hal: It would have to be more than likely.

Rep. Stevens: B/c of their convictions in court, can't they be blocked in the NPLEEx system for purchasing anything.

Rep. Horn: Yes, that's my understanding.

Rep. Stevens: The court could forfeiture of house, car, etc.

Van Shaw: Those same statues would apply to Meth. The state controlled tax applies to meth as it does other substances.

Rep. Stevens: Is there a way that the pill form could be altered so it's not usable in meth?

Van Shaw: I have heard that reformation has been going on, but I can't tell you where it is.

Rep. Horn: Two states have come up with a reformation with a very good drug, but you can't make meth out of it.

Hal Pell: I have done some research to find that it can be done, but already the meth cooks can reformulate it to use for meth.

Rep. Tolson: Are people making meth to sell?

Van Shaw: It usually is a group effort. The smurfs bring pseudoephedrine to the cook to make meth for them. There is some trafficking, it varies. One individual for himself is rare.

Hal: Talk about the specific statues. Law enforcement has to be on a specific investigation.

Rep. Faircloth: In the states that have been successful - are they cutting down on the use of meth or manufacturing?

Van Shaw: The manufacturing. Where there is demand, meth is coming in one way or the other.

Rep. Horn: You talk about children that have been affected or injured. Do you just track children that have been removed from the home?

Van Shaw: Yes. These are statistics only in relation to our response.

Rep. Horn: and adults-elders adults—were they removed as well?

Van Shaw: Yes. We engage DSS with children. With elder adults-they have other options. We track that. We know some can't leave voluntarily.

Rep. Horn: NC is number 9 in state rankings on one of your slides. How has that changed in the last 3 or 4 years?

Van Shaw: This is the first year we have broken into the top ten. We were always in the upper tier.

Rep. Horn: It's my understanding that pseudoephedrine is the only thing that you cannot substitute something for in manufacturing meth. Is this correct?

Van Shaw: Yes-you can use ephedrine. It's not readily available and it's much more expensive. That is why we see pseudoephedrine used rather than ephedrine.

Rep. Horn: Thank you very much.

Rep. Horn: We were assigned the task of overseeing the NPLeX system. We saw that it was fully implemented in the state of N.C. The challenge for us is "now what"? We were brought together to monitor and make recommendations for cost, effectiveness, what makes sense? I have made 5 recommendations. The staff will discuss each one.

Committee recommendations are all listed on the committee website in the final report to the North Carolina General Assembly.

The report was adopted as amended by the committee. Rep. Stevens moved to adopt the report; Rep. Walend seconded. Rep. Horn adjourned the meeting.

Respectfully submitted,

Rep. D. Craig Horn, co-chair

Laurie L. Payne, committee clerk